# **Application Data Sheet**

### **Application Information**

Application Type:: Regular Subject Matter:: Utility

Suggested Classification::

Suggested Group Art Unit::

CD-ROM or CD\_R?:: Table

Number of CD disks:: Number of copies of CDs::

Sequence Submission:: No

Computer Readable Form (CRF)?:: No

Title:: CABLE FAILURE DEVICE FOR GARAGE DOORS

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Attorney Docket Number:: 9680.243US01

Request For Early Publication:: No

Request For Non-Publication:: No

Suggested Drawing Figure::

Total Drawing Sheets:: 7

Small Entity:: No

Latin Name::

Variety Denomination Name::

Petition Included::

Petition Type::

Licensed US Govt. Agency::

Contract or Grant Numbers::

Secrecy Order in Parent Appl.?:: No

#### **Applicant Information**

Applicant Authority Type:: Inventor

Primary Citizenship Country:: Canada

Status:: Full Capacity

Given Name:: Michel

Middle Name::

Family Name:: BEAUDOIN

Name Suffix::

City of Residence:: Drummondville

State or Province of Residence:: Quebec

Country of Residence:: Canada

Street of mailing address:: 405 Chemin du Golf

City of mailing address:: Drummondville

State or Province of mailing address:: Quebec

Country of mailing address:: Canada

Postal or Zip Code of mailing address:: J2B 5L9

## **Applicant Information**

Applicant Authority Type:: Inventor

Primary Citizenship Country:: Canada

Status:: Full Capacity

Given Name:: Érik

Middle Name::

Family Name:: NADEAU

Name Suffix::

City of Residence:: Lévis

State or Province of Residence:: Quebec

Country of Residence:: Canada

Street of mailing address:: 4 Olivar Asselin

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City of mailing address:: Lévis

State or Province of mailing address:: Quebec

Country of mailing address:: Canada

Postal or Zip Code of mailing address:: G6W 5X1

#### **Applicant Information**

Applicant Authority Type:: Inventor

Primary Citizenship Country:: Canada

Status:: Full Capacity

Given Name:: Pierre-Louis

Middle Name::

Family Name:: FOUCAULT

Name Suffix::

City of Residence:: St-Lambert

State or Province of Residence:: Quebec

Country of Residence:: Canada

Street of mailing address:: 295 cr. Achin

City of mailing address:: St-Lambert

State or Province of mailing address:: Quebec

Country of mailing address:: Canada

Postal or Zip Code of mailing address:: H1T 1P8

# **Applicant Information**

Applicant Authority Type:: Inventor

Primary Citizenship Country:: Canada

Status:: Full Capacity

Given Name:: Jean-François

Middle Name::

Family Name::

LÉVESQUE

Name Suffix::

City of Residence::

St Nicéphore

State or Province of Residence::

Quebec

Country of Residence::

Canada

Street of mailing address::

95 rue des Forestiers

City of mailing address::

St-Nicéphore

State or Province of mailing address::

Quebec

Country of mailing address::

Canada

Postal or Zip Code of mailing address:: J2A 3C7

## **Correspondence Information**

Correspondence Customer Number::

23552

Representative Information

Representative Customer Number::	23552
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### Foreign Priority Information

Country::	Application Number::	Filing Date::	Priority Claimed::
Canada	2,419,185	02/19/03	Yes

# **Assignee Information**

Assignee Name::

CANIMEX INC.

Street of mailing address::

285, St-Georges

City of mailing address::

Drummondville

State or Province of mailing address::

Quebec

Country of mailing address::

Canada

Postal or Zip Code of mailing address:: J2C 4H3

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